

PRINCIPAL'S QUALIFICATION PROGRAM  
Course Instructor Application Form

**Part A: Personal Information**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Ontario College of Teachers # \_\_\_\_\_ CPCO ID # \_\_\_\_\_

*Address to which all correspondence should be forwarded:*

Street: \_\_\_\_\_ Apt /Unit: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Tel: [home] ( ) \_\_\_\_\_ [work] ( ) \_\_\_\_\_ Cell # \_\_\_\_\_

E-mail: \_\_\_\_\_

Name of School (or office): \_\_\_\_\_

Panel:  Elementary  Secondary District School Board: \_\_\_\_\_

CPCO Associate Since: \_\_\_\_\_

**Part B: Professional Qualifications and Experience**

*Divisional Areas of Concentration:*

Primary  Junior  Intermediate  Senior

*Specialist Qualifications:*

1. \_\_\_\_\_ 2. \_\_\_\_\_

3. \_\_\_\_\_ 4. \_\_\_\_\_

*Date of Completion of Principal's Qualifications:* \_\_\_\_\_

*Do You Hold Supervisory Officer Qualifications?*  Yes (Year): \_\_\_\_\_  No

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**Part C: Academic Qualifications**

	Degree	Date Conferred	University	Major
1.				
2.				
3.				

**Part D: Experience in a Catholic School**

Number of Years as Principal in Catholic Schools: _____
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**Part E: Evidence of life-long learning in Catholic Education:**

*(workshops, conferences, courses, mentoring/coaching experiences)*

Topic	Date	Description

**Part F: Evidence of leading adult learning**

Topic	Date	Description

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**Part G: Identify educational articles and books read recently**

Title	Author	Description

**Part H: Experience demonstrating digital competencies using technology for collaboration, leadership and learning**

**Part I: Briefly describe your experience as a principal in a Catholic school (role, type of school, etc.)**



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**Part J: Please describe your experiences as a facilitator of adult learning and online learning.**

**Part K: Tell us how collaborative inquiry plays a role in your school leadership.**



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**Part L: In addition to your role as Principal, what other responsibilities/leadership opportunities do you have in your school board?**

**Part M: Please articulate your vision for Catholic education leadership in 200 words or less**



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**Office Use Only:**

Date Received: \_\_\_\_\_ Reviewed by: \_\_\_\_\_

Receipt Confirmation Letter Sent on: \_\_\_\_\_ Interview Granted:  Yes  No

Interview Date: \_\_\_\_\_ Position Offered:  Yes  Position Accepted  Position Declined

Notes:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please email your completed form to Vanessa Kellow at [vkellow@cpc.o.on.ca](mailto:vkellow@cpc.o.on.ca)**